

SMART LIVING

A PUBLICATION OF THE PUBLIC EDUCATION HEALTH TRUST

Public Education
HEALTH TRUST 

MAY / JUNE
2019 ISSUE

IT'S TIME FOR OPEN ENROLLMENT

Open Enrollment is here! This is your annual opportunity to review your benefits and make changes for the coming plan year (July 1, 2019-June 30, 2020).

Many Associations/Districts added new benefit plan offerings for this upcoming year. Please contact the Trust office or your Human Resources Department for a new enrollment form.

HOW TO ENROLL

If you are currently enrolled in the Public Education Health Trust and wish to maintain your *current* coverage, or if you are currently waived and wished to remain waived from the Trust, *there is no action required*.

If you are enrolled and wish to change your plan selection offered by your Association/Employer, you will need to complete a new enrollment form and submit **no later than June 14, 2019**. List the dependents on the enrollment form for whom you wish to provide coverage. If they are currently enrolled, no additional documentation is required; however, you will need to place their names on the enrollment form, confirming you wish to continue providing them coverage. If you are adding dependents who are not currently enrolled, you must include verification they are an eligible dependent (i.e. marriage or birth certificate, etc.). Please contact either the Trust or your human resource department for options.

If you are currently waived and wish to enroll, you must submit your enrollment form along with required documents to the Trust **no later than June 14, 2019**.

If you are currently enrolled and wish to waive coverage, your waiver form must be submitted to the Trust office **no later than June 14, 2019**. Please note: Some school districts require proof of other coverage to be eligible to waive from this plan. Please contact your human resources department for their criteria.

The Trust recommends that you review your dependents listed to ensure accuracy. With appropriate documentation the Trust provides coverage for spouses, qualified domestic partners, children up to the age of 26, and individuals for whom you are the legal guardian up to their age of 18. A complete listing of your dependents can be found on your miBenefits secured portal at miBenefits.ebms.com.



KICK OFF SUMMER BY GETTING TO BRONZE!

Let Go365 help you step into a healthier you this summer! Take the first steps and get to Bronze status! There are three ways to kick-start your journey and get to Bronze status in the Go365 program.

1) GET STARTED WITH THE GO365 HEALTH ASSESSMENT!**

You have two options to complete the Health Assessment:

- 1 Online at Go365.com
 - Sign into www.Go365.com
 - Find the Health Assessment in your dashboard if you haven't completed it this program year
- 2 Sign into the Go365 app (available for download from the Apple Store or Google Play)
 - Android users: Tap Go365 Health Assessment from the app menu (menu icon is the three lines in upper left corner of app)
 - iOS users: Tap Go365 Health Assessment within "More Menu"
 - If you haven't completed the Health Assessment, it shows as an option within the app dashboard for both Android and iOS users as well

***Adult children are not eligible to earn points or bonus points for Health Assessment completion.*

2) START MOVING, TRACK FITNESS IN GO365 AND MOVE TO BRONZE!

There are a multitude of fitness options that you can take advantage of with Go365, and many will earn you easy points,



fast. To take advantage of these point opportunities, you will need to connect some sort of fitness device or app. To learn how to connect a fitness device or app, click here.

Once your device is linked with Go365, you can complete verified workouts to earn points. Depending on what your device or app tracks, you can receive one point for every 1,000 steps that you take, five points for every 15 minutes above 60 percent of your maximum heart rate, or five points per 100 calories you burn, if the burn rate exceeds 200 calories per hour (Go365 will automatically determine the highest value across all workout types and devices – that's what it will record in your points value).

If you have a gym membership, you can also check to see if you can earn points by connecting with that gym. Once you log into your Go365 account, click "Quick Links" at the top of the screen and then "Participating fitness facilities." From there, you can search for participating gyms in your area and learn how they can help track and send points straight to Go365. You can earn 10 points for each daily visit once you are connected.

3) GET YOUR YEARLY PHYSICAL TO EARN MORE POINTS!

Complete a biometric screening with your primary care physician. To find more information on completing this, log into your Go365 website page and click on Activities -> Prevention -> Biometric Screening.

Participate in Go365 to earn great rewards!

Making healthier choices is more fun with Go365! As a Go365 member, you earn points for completing healthy activities. You get one Buck for each point you earn, plus Bonus Bucks when you reach a higher status levels. These Bucks add up for you to spend in the Go365 Mall on products from popular brands and retailers. Visit the Go365 Mall online or on the app to see all the great products, deals and offers Go365 has to offer.

What kind of rewards can I earn?

The Go365 mall has lots of options!

- Gift cards from Amazon, Target, Lowe's, Best Buy, and Macy's
- Movie tickets
- Fitness devices and equipment
- Donate your Bucks as cash to many charity options

These are just some of the great options for you to use your earned Bucks in the Go365 program! In addition, you can receive deals and discounts from places like Priceline, The Biggest Loser Resort, Rock 'n' Roll Marathon Series, and more, just by being a Go365 member.

Don't miss out on your opportunities to engage in your well-being through the Go365 program!

TELADOC - A LOWER COST OPTION FOR QUALITY CARE

Teladoc[™]
HEALTH

Did you know your Public Education Health Trust (PEHT) of Alaska health plan provides access to board-certified, practicing physicians by phone or video when you have symptoms of a minor illness? And, if you are traveling, you can speak with a doctor wherever you are in the United States.

You simply complete the same medical history that you provide to your primary care physician's office and request a visit with the next available doctor – or schedule an appointment time that works best for you. The doctor will review your medical history and symptoms before giving you a call and will take time to answer your questions.

Your visit diagnosis can be shared with your primary care physician to ensure continuity of care between all of your medical providers, and any prescriptions that are medically necessary will be submitted to your preferred pharmacy so you can pick them up from your pharmacist.

Teladoc physicians have an average of 15-20 years of clinical experience and are board certified in family medicine, internal medicine, pediatrics or emergency medicine. They regularly treat sinus problems, allergies, bronchitis, upper respiratory infections, colds, coughs, sore throats, nausea and upset stomach symptoms plus many other minor ailments. Over 90 percent of member issues are resolved with a Teladoc visit.

In addition to staying out of a waiting room that might be full of people with more serious illnesses, your cost to speak to a Teladoc doctor may be less than a visit to your primary care doctor.

PPO Plan members can speak with a Teladoc doctor at no cost, and HDHP plan members pay \$45 per visit until the deductible is met and pay no cost afterward.

If you are ready to try Teladoc services, simply set up your Teladoc account on the Teladoc mobile app, at www.Teladoc.com, or call the friendly member service team at 1-855-Teladoc (835-2362) to get started.



DEDUCTIBLE:

DID YOU KNOW?

The amount you owe for covered health care services before your health insurance plan begins to pay. *For example, if your deductible is \$1,500, your plan won't pay anything until you've paid \$1,500 for covered services.*

Preventative care is not subject to deductible.

WHEN ON A TRIP, STAY IN-NETWORK

When you are out of the area on vacation or a business trip, we sure hope you don't need medical attention. But if you do, remember that you can find in-network provider options to control your healthcare costs.

PEHT members can look for in-network options through our partnership with Aetna. Just go to aetna.com/asa and search the online directory for providers who can meet your needs when you are away from home.

aetnaSM

AN EXCITING CHANGE TO HOW YOU PAY FOR YOUR MEDICATIONS

Starting July 1, 2019, Public Education Health Trust's (PEHT) cost sharing for prescription medication will change from a copayment plan to a coinsurance plan. PEHT currently uses a coinsurance plan for specialty medications.

HOW DOES THE COINSURANCE PLAN WORK?

In a copayment plan, you pay a copay, which is a fixed amount for your prescriptions, such as \$17 for a generic 30-day supply. In a coinsurance plan, you pay a percentage of the total medication cost. For example, if the plan pays 70 percent of the medication cost, you would pay the other 30 percent. PEHT's plan includes cost limits on the minimum amount you must pay and the maximum amount you would pay out of pocket.

WHAT DOES THE CHANGE MEAN FOR YOU?

This plan change provides PEHT members with information to help manage the rising cost of medication. Also, the OptumRx® website and app drug-pricing tools make it easy to price medications, compare retail pharmacy prescription costs for 90-day supplies, and find lower-cost options. Changing to a coinsurance plan could also provide you with:

- Greater awareness of medication costs and amount being paid by your plan.
- More control over cost savings because pharmacy prices can vary.
- Ability to better manage your out-of-pocket costs.



EXPLORE WAYS TO FIND LOWER-COST MEDICATIONS



OptumRx® is committed to enhancing your pharmacy care experience by providing ways to help you save money on your prescriptions:

- 1 Check with your doctor about using PreCheck MyScript. This new tool helps to simplify the prescriptions process. It allows doctors to view more accurate patient medication cost information within their electronic medical records (EMR) system. This makes it easy to compare drug prices, view drug alternatives and helps provide:
 - Timely prescriptions
 - Reduced administrative waste
 - Better patient care
 - Enhanced prior authorizations
- 2 Visit optumrx.com to compare medication prices at different pharmacies.
- 3 Save time and money with OptumRx home delivery. You can enroll in home delivery at www.optumrx.com or by calling the toll free number on your member ID card.

LOCAL PEHT LEADERS WORK TO PROVIDE STRONG BENEFIT PLANS

As pressures on healthcare costs continue to rise, the leaders of Alaska's Public Education Health Trust have redoubled efforts to procure affordable healthcare services for its members employed by school districts across the state.

PEHT was founded 20 years ago as a not-for-profit that pools the employees of small and large public-school districts together to maximize the purchasing power of the organization. The ultimate goal is to control healthcare costs and increase the availability of benefits.

We believe in local control of insurance plan decisions and work to offer innovative choices on plans that meet members' budgets and personal needs. Plans with low-cost options are available.

The average cost of healthcare in Alaska went up 10-12 percent last year, but for PEHT members, costs went up only about 3 percent. PEHT has three sources for preferred-provider savings: direct contracting, the Aetna Dental network and the Aetna Signature Administrators network for medical. Across all three sources, we negotiated discounts of \$46.45 million in 2018.

BELIEF IN LOCAL CONTROL, LOCAL CHOICE

A seven-member board of trustees made up of Alaska educators and school staff guides the organization and advocates on behalf of members, assisted by Chief Financial Officer Rhonda Prowell-Kitter, Trust Claim Analyst Rebecca Hubbard and Administrative Assistant Tia Cross.

The leaders of the Trust believe in local control and local choice. They regularly review benefit offerings and business relationships to ensure that every healthcare dollar invested by members is well spent and that clinical outcomes meet or exceed expectations. They work to keep administrative costs low. PEHT acts as its members' advocate during appeals of any claim decision and plan provision interpretation.

Prowell-Kitter says that current legislative proposals to establish a large Alaska Health Care Authority would not bring costs down, and points to Oregon and Washington as examples of states that formed HCAs and saw healthcare costs rise above estimates. PEHT's ability to be nimble and creative allows it to respond quickly to take advantage of cost savings, she says.

PEHT's office is located in Anchorage. If you have questions about what PEHT can do for you, email them to info@pehtak.com or call toll-free 888-685-7526. The PEHT website at <https://pehtak.com> has a lot of helpful information about the Trust. The mailing address of Public Education Health Trust, 4003 Iowa Drive, Anchorage, Alaska, 995178.

The PEHT website at <https://pehtak.com> has a lot of helpful, up-to-date information about the Trust, including links to almost 30 health-plan benefit booklets for districts and associations from Alaska Gateway School District to Wrangell School District.



REACH OUT WITH QUESTIONS

If you have any questions regarding plan administration, costs, oversight or to request a benefit, please reach out to plan administrators. The website also has links to forms for prescriptions, address changes, claim appeals and other documents needed to manage your plan or benefits.

Employee Benefit Management Services (EBMS) administers PEHT's benefit plans. Based in Montana, EBMS is a third-party administrator that has served clients throughout the Northwest for almost 40 years. It is a national leader in health-risk management and third-party administration of self-funded health benefit plans. EBMS designs strategies to transform the health and well-being of individuals, organizations and communities.

EBMS utilizes provider networks and direct contracts that reach into every city, county and school district in Alaska, and across the nation, to access discounted pricing.

Members who have a question about claims for medical or dental services should contact a EBMS customer-service representative at PEHT's dedicated toll-free number, 866-247-1443. They can also login to miBenefits, a 24/7 online benefits portal, to obtain answers to most benefits questions.



P.O. Box 21367 • Billings, MT 59104-1367

This publication was created and sent to you
by EBMS on behalf of the
Public Education Health Trust.

SMART LIVING

A PUBLICATION OF THE PUBLIC EDUCATION HEALTH TRUST



Follow us on Twitter
@PEHTAK



Like us on Facebook
**Public Education
Health Trust**

Follow us on Twitter and
like us on Facebook to take
a short quiz about this
edition of SMART LIVING
for your chance to be
entered into a drawing for
a \$50 Visa Gift Card!

HOW MUCH DO YOU KNOW?

COMPLETE THE QUIZ
AND WIN \$50!

NOVEMBER/DECEMBER
QUIZ WINNER:

CARLENE HOCKEMA